PTO/SB/06 (08-03)

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October 1 2004 Substitute for Form PTO-875								Application or Docket Number		
<u>ر</u>	HOWEI	CLAIMS AS F	ILED -		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AN MOSE SU SD			NUMBER EXTRA		RATE	FEE	- 1	RATE	FEE	
ASIC FEE					s_	<i>3</i> 95	OR.		<u>.190</u>	
OTA	OTAL CLAIMS					x 5 9 =		OR	x s 8 = 1	<u> </u>
37 CFR 1.16(c)) NDEPENDENT CLAIMS			minus 20 =			× 44 =		OR	x s 85 =	
37 CFR 1.16(b)) minus 3 = 1						150		OR	+\$300=	-
AULT	IPLE DEPENDEN	T CLAIM PRESENT	(37	CFR 1.16(d))		+\$ <u>1,70</u> =				
' If the	e difference in co	lumn 1 is less thar	zero, ent	er "0" in column 2		TOTAL		OR'	TOTAL [
	CL	AIMS AS AME	NDED -	- PART II				•_		
	(Column 3)				(Column 3)	SMALL EN	TITY	OR	OTHER SMALL	THAN ENTITY
	т	(Column 1)		(Column 2) HIGHEST			ADDI-	-	RATE	ADDI-
۲		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE		10.112	TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))	+	Minus	**	=	x \$ = 1_		OR	x \$ <u>/8</u> =	-
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× 844 =		OR	x \$ <u>88</u> =	
뾝			DEDENDE	NT CLAIM (37 CE	R 1.16(d))	+\$150=		OR	+,200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL		OR:	TOTAL ADD'L FEE	
						ADD'L FEE	4	4		
		(Column 1)		(Column 2) HIGHEST	(Column 3)			;		4001
B	`	CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total (37 CFR 1.16(c))	AMENDIALITY	Minus	**	=	× s_4 =		OR	x s/8 =	1 -
N	(37 CFR 1.16(b)) Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$ 44 =		OR	x \$88 =	
AME		ATION OF MULTIPL	5 DEOCND	ENT CLAIM (37 C	ER 1 16(d))	+./5/)=		OR	+,300=	
	FIRST PRESENT	ATION OF MULTIPLE	EUCFEND	Elti OBam (or or		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)				:	,
<u>ပ</u>		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI TIONA FEE
		AMENDMENT	Minus	PAID FOR	 	1 - 0	FEE		x \$ /8 =	1
M	Total (37 CFR 1.16(c))		Minus	411	-	x \$ <u>4</u> =		OR	x.58 =	
AMENDMENT	Independent (37 CFR 1.16(b))	<u> </u>	Minus	<u></u>		× \$ <u>44</u> =		OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					+ s/50=		OR	+ \$300 =	
_									ADD'L FEE	

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

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